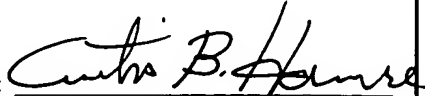


FORM PTO-1390 (REV 10-94)		U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE		ATTORNEY'S DOCKET NUMBER	
TRANSMITTAL LETTER TO THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US) CONCERNING A FILING UNDER 35 U.S.C. 371				11336.1025USWO	
				U.S. APPLICATION NO. (If known, see 37 C.F.R. 1.5) 10/591889	
INTERNATIONAL APPLICATION NO. PCT/IN2005/000125		INTERNATIONAL FILING DATE April 25, 2005		PRIORITY DATE CLAIMED April 28, 2004	
TITLE OF INVENTION PROCESS FOR THE PREPARATION OF TELITHROMYCIN					
APPLICANT(S) FOR DO/EO/US SOHANI et al.					
Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:					
<ol style="list-style-type: none"> 1. <input checked="" type="checkbox"/> This is a FIRST submission of items concerning a filing under 35 U.S.C. 371. 2. <input type="checkbox"/> This is a SECOND or SUBSEQUENT submission of items concerning a filing under 35 U.S.C. 371. 3. <input checked="" type="checkbox"/> This express request to begin national examination procedures (35 U.S.C. 371(f)) at any time rather than delay examination until the expiration of the applicable time limit set in 35 U.S.C. 371(b) and PCT Articles 22 and 39(I). 4. <input checked="" type="checkbox"/> A proper Demand for International Preliminary Examination was made by the 19th month from the earliest claimed priority date. 5. <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371(c)(2)) <ol style="list-style-type: none"> a. <input type="checkbox"/> is transmitted herewith (required only if not transmitted by the International Bureau). b. <input checked="" type="checkbox"/> has been transmitted by the International Bureau. c. <input type="checkbox"/> is not required, as the application was filed in the United States Receiving Office (RO/US) 6. <input type="checkbox"/> A translation of the International Application into English (35 U.S.C. 371(c)(2)). 7. <input checked="" type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371(c)(3)) <ol style="list-style-type: none"> a. <input type="checkbox"/> are transmitted herewith (required only if not transmitted by the International Bureau). b. <input type="checkbox"/> have been transmitted by the International Bureau. c. <input type="checkbox"/> have not been made; however, the time limit for making such amendments has NOT expired. d. <input checked="" type="checkbox"/> have not been made and will not be made. 8. <input type="checkbox"/> A translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371(c)(3)). 9. <input checked="" type="checkbox"/> An unsigned oath or declaration of the inventor(s) (35 U.S.C. 371 (c)(4)). 10. <input type="checkbox"/> A translation of the annexes to the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371(c)(5)). 					
Items 11. to 16. below concern document(s) or information included:					
11. <input checked="" type="checkbox"/> An Information Disclosure Statement under 37 CFR 1.97 and 1.98, Form 1449, 5 references.					
12. <input type="checkbox"/> An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included.					
13. <input type="checkbox"/> A FIRST preliminary amendment. <input type="checkbox"/> A SECOND or SUBSEQUENT preliminary amendment.					
14. <input type="checkbox"/> A substitute specification.					
15. <input type="checkbox"/> A change of power of attorney and/or address letter.					
16. <input checked="" type="checkbox"/> Other items or information: Application Data Sheet (6 pages), International Publication, Form PCT/RO/101, Form PCT/IB/301, Form PCT/ISA/202, Form PCT/IB/304, Form PCT/ISA/220, Form PCT/ISA/237, Form PCT/IPEA/402, Form PCT/IPEA/416, Form PCT/IPEA/409, Form PCT/IPEA/401, Form PCT/IB/311					

U.S. APPLICATION NO. (If known, see 37 C.F.R. 1.5) 40/591889		INTERNATIONAL APPLICATION NO. PCT/IN2005/000125		ATTORNEY'S DOCKET NUMBER 11336.1025USWO	
BASIC NATIONAL FEE (37 CFR 1.492(a) (1)-(5)):					
<input checked="" type="checkbox"/> a) Basic National fee.....\$300				\$300	
<input checked="" type="checkbox"/> b) Examination fee.....\$200				\$200	
<input checked="" type="checkbox"/> c) Search fee.....\$500				\$400	
TOTAL OF ABOVE CALCULATIONS =				\$900	
Additional fee for specification and drawings filed in paper over 100 sheets (excluding sequence listing or computer program listing filed in an electronic medium). The fee is \$250 for each additional 50 sheets of paper or fraction thereof.					
Total Sheets	Extra Sheets	Number of each additional set of 50 sheets, more than 100 sheets	Rate		
39 - 100 =	0 / 50 =		X \$250	\$0	
Surcharge of \$130 for furnishing the oath or declaration later than [] 20 [] 30 months from the earliest claimed priority date (37 CFR 1.492(e)).				\$	
	CLAIMS (AS FILED)	NUMBER EXTRA	RATE		
Total claims	42 - 20 =	22	X \$50	\$1100	
Independent claims	5 - 3 =	2	X \$200	\$400	
MULTIPLE DEPENDENT CLAIM(S) (if applicable)			+ \$360	\$	
TOTAL OF ABOVE CALCULATIONS =				\$2400	
Reduction by 1/2 for filing by small entity, if applicable. Small entity status is claimed pursuant to 37 CFR 1.27				- \$	
SUBTOTAL =				\$	
Processing fee of \$130 for furnishing the English translation later than [] 20 [] 30 months from the earliest claimed priority date (37 CFR 1.492(f)).				+ \$	
TOTAL NATIONAL FEE =				\$2400	
Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40 per property				+ \$	
TOTAL FEES ENCLOSED =				\$2400	
				Amount to be:	
				refunded	\$
				charged	\$
<p>a. <input checked="" type="checkbox"/> Check(s) in the amount of \$2400 to cover the above fees is enclosed.</p> <p>b. <input type="checkbox"/> Please charge the amount of \$ to cover the required filing fee for a large entity to the credit card listed on the enclosed credit card authorization form.</p> <p>c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 50-3478.</p>					
<p>NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the application to pending status.</p>					
<p>SEND ALL CORRESPONDENCE TO: Curtis B. Hamre Hamre, Schumann, Mueller & Larson, P.C. P.O. Box 2902 Minneapolis, MN 55402</p>					
				SIGNATURE: 	
				NAME: Curtis B. Hamre	
				REGISTRATION NUMBER: 29,165	

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

10/591 889

IAP9 Rec'd PCT/PTO 07 SEP 2006

Applicant: SOHANI et al.

Docket: 11336.1025USWO

Title: PROCESS FOR THE PREPARATION OF TELITHROMYCIN

CERTIFICATE UNDER 37 CFR 1.10:

"Express Mail" mailing label number: EV 858800528 US
 Date of Deposit: September 7, 2006

I hereby certify that this paper or fee is being deposited with the U.S. Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to: Mail Stop PCT, Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450.

By: 

Name: ABBIE LARKIN

Mail Stop PCT
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, Virginia 22313-1450

Sir:

We are transmitting herewith the attached:

- ☒ Transmittal sheet, in duplicate, containing Certificate under 37 CFR 1.10.
- ☒ National Stage PCT Patent Application: Spec. 26 pages, Claims 12 pages, and 1 page of abstract, The fee has been calculated as shown below in the 'Claims as filed' table.
- ☒ An unsigned Combined Declaration and Power of Attorney
- ☒ Check in the amount of \$2400 to cover the Filing Fee
- ☒ Form 1390
- ☒ Information Disclosure statement, Form 1449, 5 references (including ISR)
- ☒ Application Data Sheet, 6 pages.
- ☒ Other items or information: International Publication, Form PCT/RO/101, Form PCT/IB/301, Form PCT/ISA/202, Form PCT/IB/304, Form PCT/ISA/220, Form PCT/ISA/237, Form PCT/IPEA/402, Form PCT/IPEA/416, Form PCT/IPEA/409, Form PCT/IPEA/401, Form PCT/IB/311
- ☒ Return postcard

CLAIMS AS FILED

Number of Claims Filed	No.	In Excess of	Extra	Rate	Fee
Total Claims	42	20	22	50.00	= 1100.00
Independent Claims	5	3	2	200.00	= 400.00
Multiple Dependent Claims Fee					= 0.00
Basic Filing Fee					= 300.00
Search Fee					= 400.00
Examination Fee					= 200.00
Utility Application Size Fee	29	100	0	250.00	= 0.00
Total					= \$2400

Please charge any additional fees or credit overpayment to Deposit Account No. 50-3478. A duplicate of this sheet is enclosed.

Hamre, Schumann, Mueller & Larson, P.C.
 P.O. Box 2902 Minneapolis, MN 55402
 612.455-3800

By: 

Name: Curtis B. Hamre
 Reg. No.: 29,165
 Initials: CBH:DPM:rkW

52835

PATENT TRADEMARK OFFICE

(PTO TRANSMITTAL - NEW FILING)